

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 20, 2006 08:00 AM
Secretary of State

DOCUMENT # P00000007409

1. Entity Name
OMNI QUALITY ENGINEERING, INC.



Principal Place of Business
**1253 PARK ST.
CLEARWATER, FL 33756**

Mailing Address
**1253 PARK ST.
CLEARWATER, FL 33756**



07152006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3652116

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SLAUGHTER, JOHN E JR ESQ
1253 PARK ST.
CLEARWATER, FL 33756**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when relocating) DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE **P**
NAME **MOSHER, DANIEL**
STREET ADDRESS **1625 CHATAM CT**
CITY-ST-ZIP **OLDSMAR, FL 34677**

TITLE **VP**
NAME **MOSHER, SADA E**
STREET ADDRESS **1625 CHATAM CT**
CITY-ST-ZIP **OLDSMAR, FL 34677**

TITLE
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07/20/06-80014-002 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Daniel Mosher Daniel Mosher 7-18-06 727-786-2220
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #